
State:	District of Columbia	Filing Company:	Standard Insurance Company
TOI/Sub-TOI:	H11G Group Health - Disability Income/H11G.002 Short Term		
Product Name:	Group Disability Amendment		
Project Name/Number:	GP399-STD/A1213/GP399-STD/A1213		

Filing at a Glance

Company:	Standard Insurance Company
Product Name:	Group Disability Amendment
State:	District of Columbia
TOI:	H11G Group Health - Disability Income
Sub-TOI:	H11G.002 Short Term
Filing Type:	Rate
Date Submitted:	03/11/2014
SERFF Tr Num:	STAN-129431180
SERFF Status:	Pending Industry Response
State Tr Num:	
State Status:	
Co Tr Num:	GP399-STD/A1213
Implementation	On Approval
Date Requested:	
Author(s):	Nathan Keyes, Jeremy Dixon, Blanche Sabo
Reviewer(s):	Darniece Shirley (primary), Alula Selassie, Donghan Xu
Disposition Date:	
Disposition Status:	
Implementation Date:	
State Filing Description:	

State: District of Columbia **Filing Company:** Standard Insurance Company
TOI/Sub-TOI: H11G Group Health - Disability Income/H11G.002 Short Term
Product Name: Group Disability Amendment
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General Information

Project Name: GP399-STD/A1213 Status of Filing in Domicile: Pending
Project Number: GP399-STD/A1213 Date Approved in Domicile:
Requested Filing Mode: Review & Approval Domicile Status Comments:
Explanation for Combination/Other: Market Type: Group
Submission Type: New Submission Group Market Size: Small and Large
Group Market Type: Employer, Association, Trust, Other Explanation for Other Group Market Type: Union
Overall Rate Impact: Filing Status Changed: 04/08/2014
State Status Changed:
Deemer Date: Created By: Blanche Sabo
Submitted By: Blanche Sabo Corresponding Filing Tracking Number: STAN-129431181

Filing Description:

Re:
Standard Insurance Company
Group Short Term Disability Policy Amendment Form GP399-STD/A1213
Group Short Term Disability Certificate Amendment Form GC399-STD/A1213

Corresponding Form Filing Number: STAN-129431181 was submitted February 28, 2014.

Standard Insurance Company is filing changes to our Group Short Term Disability Insurance product for review and approval.

Standard's Group STD product is filed under Group Policy Form GP399-STD and Group Certificate Form GC399-STD, both of which were approved for use in your state effective December 22, 1998.

Enclosed are duplicate copies of Group Policy Amendment Form GP399-STD/A1213, along with the corresponding Group Certificate Amendment Form GC399-STD/A1213. The forms included in this filing amend existing language and adds new language to the policy provisions as noted in the forms. A detailed Statement of Variability (SOV) is included under the Supporting Document tab.

The specific benefit design of each group policy is negotiated and agreed upon by Standard Insurance Company and the Policyholder at the time of policy issue, and the appropriate filed language is then automatically included in the body of the policy and certificate. While the attached forms are submitted on 8 ½ by 11 pages, we may also print the same text in a booklet format (5 ½ by 8 ½ pages) or on electronic media (e.g. CD-ROM, Internet) if requested by a Policyholder. Also, if so requested, we may issue certificates in a foreign language, based upon a direct translation of the filed wording.

The underlying group insurance product is, and will continue to be, marketed through normal insurance channels (insurance brokers and representatives) to groups traditionally eligible for group insurance. Although the majority of group policies will be issued to employers to cover their employees, we will on occasion issue to other groups as allowed by state law. There is no deviation from generally accepted insurance practices.

I certify that the attached forms meet and exceed the requirements of the District of Columbia Policy Language Simplification Act when included in the base policy and certificate.

Company and Contact

Filing Contact Information

State:	District of Columbia	Filing Company:	Standard Insurance Company
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Blanche Sabo, Senior Compliance Analyst bsabo@standard.com
900 SW Fifth Ave 971-321-8475 [Phone]
C14C 971-321-8369 [FAX]
Portland, OR 97204

Filing Company Information

Standard Insurance Company	CoCode: 69019	State of Domicile: Oregon
1100 SW 6th Avenue	Group Code: 1348	Company Type: Life
Portland, OR 97204	Group Name: SIC	Insurance
(971) 321-6823 ext. [Phone]	FEIN Number: 93-0242990	State ID Number:

Filing Fees

Fee Required?	No
Retaliatory?	No
Fee Explanation:	

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Rate Information

Rate data applies to filing.

Filing Method:

Rate Change Type: Neutral

Overall Percentage of Last Rate Revision: %

Effective Date of Last Rate Revision:

Filing Method of Last Filing:

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	Number of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where req'd):	Minimum % Change (where req'd):
Standard Insurance Company	%	%				%	%

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Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		STD A1213 Rates	GP399-STD/A1213, GC399-STD/A1213	New		STD 20140228 Rate Manual Changes.pdf,

PARTICIPATION FACTORS:

If employer contributes full cost

FACTOR

.88

If employer contributes less than the full cost then the participation factor will be the product of the Base Factor, Replacement Ratio Factor, 60 Day Late Enrollee Factor, Pre-Existing Exclusion Factor, and the Composite Factor.

Base Participation Factor

Participation	Female %				
	10%	30%	50%	70%	90%
100%	0.88	0.88	0.88	0.88	0.88
99%	0.89	0.89	0.89	0.89	0.89
98%	0.89	0.89	0.89	0.89	0.89
97%	0.90	0.90	0.90	0.90	0.90
96%	0.90	0.90	0.90	0.90	0.90
95%	0.90	0.90	0.90	0.90	0.91
94%	0.91	0.91	0.91	0.91	0.92
93%	0.91	0.91	0.91	0.91	0.92
92%	0.91	0.91	0.91	0.91	0.92
91%	0.92	0.92	0.92	0.92	0.93
90%	0.92	0.92	0.92	0.93	0.93
89%	0.93	0.93	0.93	0.94	0.94
88%	0.93	0.93	0.93	0.94	0.94
87%	0.94	0.94	0.94	0.95	0.95
86%	0.94	0.94	0.94	0.95	0.96
85%	0.94	0.94	0.94	0.95	0.96
84%	0.95	0.95	0.95	0.96	0.97
83%	0.95	0.95	0.95	0.96	0.97
82%	0.96	0.96	0.96	0.97	0.98
81%	0.96	0.96	0.96	0.97	0.98
80%	0.97	0.97	0.97	0.98	0.99
79%	0.97	0.97	0.97	0.98	0.99
78%	0.98	0.98	0.98	0.99	1.01
77%	0.98	0.98	0.98	0.99	1.01
76%	0.99	0.99	0.99	1.00	1.02
75%	0.99	0.99	0.99	1.00	1.02
74%	1.00	1.00	1.00	1.02	1.03
73%	1.01	1.01	1.01	1.03	1.04
72%	1.01	1.01	1.01	1.03	1.04
71%	1.02	1.02	1.02	1.04	1.06
70%	1.02	1.02	1.02	1.04	1.06
69%	1.03	1.03	1.03	1.05	1.07
68%	1.03	1.03	1.03	1.05	1.07
67%	1.04	1.04	1.04	1.06	1.08
66%	1.05	1.05	1.05	1.07	1.09
65%	1.05	1.05	1.05	1.07	1.09
64%	1.06	1.06	1.06	1.08	1.11
63%	1.07	1.07	1.07	1.09	1.12

Participation	Female %				
	10%	30%	50%	70%	90%
62%	1.07	1.07	1.07	1.09	1.12
61%	1.08	1.08	1.08	1.11	1.13
60%	1.08	1.08	1.08	1.11	1.13
59%	1.09	1.09	1.09	1.12	1.14
58%	1.10	1.10	1.10	1.13	1.16
57%	1.11	1.11	1.11	1.14	1.17
56%	1.11	1.11	1.11	1.14	1.17
55%	1.12	1.12	1.12	1.15	1.18
54%	1.13	1.13	1.13	1.16	1.19
53%	1.13	1.13	1.13	1.16	1.19
52%	1.14	1.14	1.14	1.17	1.21
51%	1.15	1.15	1.15	1.18	1.22
50%	1.16	1.16	1.16	1.19	1.29
49%	1.16	1.16	1.16	1.20	1.30
48%	1.17	1.17	1.17	1.21	1.32
47%	1.18	1.18	1.18	1.22	1.32
46%	1.19	1.19	1.19	1.23	1.33
45%	1.19	1.19	1.19	1.23	1.34
44%	1.20	1.20	1.20	1.24	1.36
43%	1.21	1.21	1.21	1.25	1.37
42%	1.22	1.22	1.22	1.26	1.38
41%	1.23	1.23	1.23	1.27	1.38
40%	1.23	1.23	1.23	1.27	1.39
39%	1.24	1.24	1.24	1.29	1.41
38%	1.25	1.25	1.25	1.30	1.42
37%	1.26	1.26	1.26	1.31	1.43
36%	1.27	1.27	1.27	1.32	1.44
35%	1.28	1.28	1.28	1.33	1.46
34%	1.28	1.28	1.28	1.33	1.47
33%	1.29	1.29	1.29	1.34	1.48
32%	1.30	1.30	1.30	1.35	1.49
31%	1.31	1.31	1.31	1.36	1.51
30%	1.32	1.32	1.32	1.38	1.53
29%	1.33	1.33	1.33	1.39	1.54
28%	1.34	1.34	1.34	1.40	1.57
27%	1.35	1.35	1.35	1.41	1.59
26%	1.36	1.36	1.36	1.42	1.60
25%	1.37	1.37	1.37	1.43	1.61

*For cases with an inforce code of "None" (First Time Buyer), when the estimated participation percentage lies within the ranges of 25%-49%, 50%-74%, and 75%-99% the participation percentage estimates of 30%, 55%, and 80%, respectively, will be used.

Replacement Ratio Factor:

<u>EMPLOYER CONTRIBUTION</u>	<u>FACTOR</u>
0 – 25%	1.15
26 – 50%	1.10
51 – 75%	1.06
76 – 99%	1.03

Gross Up plans are to be rated as a 40% employer paid plan.

60 Day Waiting Period on Late Enrollees:

- Discount varies by percent participation: Maximum discount of 5% at 25% participation, no discount at 100%

Pre-Existing Exclusion:

- Discount varies by percent participation: Minimum of 0.914 factor at 25% participation, 1.00 factor at 100%

Composite Rate Load:

- When using an all-eligible census, depending on the participation and female content of the group, a load of up to 20% will apply when quoting a composite rate. No load will apply when using an enrolled only census.

OCCUPATIONS:

Refer to **INDIVIDUAL OCCUPATIONAL ADJUSTMENT FACTORS** and/or **INDUSTRIAL OCCUPATIONAL ADJUSTMENT FACTORS** sections.

Occupation adjustments are applied to non-maternity rates only.

UNION LOAD:

A 10% load will apply to the STD calculated rate if any union members are covered under the plan.

DEFINITION OF MEMBER:

If the definition includes members working 20 but less than 30 hours per week and the number of part-time employees is unknown, load 1.05 (not applicable to banks, hospitals and school districts).

VOLUME ADJUSTMENT:

	Pre-Volume Adjusted Annual Premium Per Life							
Lives	0-99	100-149	150-199	200-249	250-299	300-399	400-499	500+
0-9	1.50	1.24	1.11	1.03	0.97	0.91	0.87	0.85
10-14	1.38	1.16	1.05	0.97	0.92	0.88	0.84	0.82
15-19	1.27	1.08	0.98	0.92	0.88	0.84	0.81	0.80
20-24	1.21	1.03	0.95	0.89	0.86	0.82	0.80	0.79
25-29	1.16	1.00	0.93	0.88	0.84	0.81	0.79	0.78
30-39	1.11	0.97	0.90	0.86	0.83	0.80	0.77	0.76
40-49	1.08	0.95	0.89	0.84	0.82	0.79	0.76	0.75
50-74	1.04	0.92	0.86	0.82	0.79	0.76	0.74	0.73
75-99	1.01	0.90	0.84	0.80	0.78	0.75	0.73	0.72
100-149	0.97	0.87	0.81	0.78	0.76	0.73	0.72	0.71
150-199	0.94	0.85	0.80	0.76	0.74	0.72	0.71	0.70
200-299	0.92	0.83	0.78	0.75	0.73	0.71	0.69	0.69
300-499	0.89	0.81	0.77	0.74	0.72	0.70	0.68	0.68
500-749	0.87	0.79	0.75	0.72	0.70	0.68	0.67	0.67
750-999	0.85	0.77	0.74	0.71	0.69	0.68	0.67	0.66
1,000-1,999	0.81	0.75	0.71	0.69	0.68	0.67	0.66	0.65
2,000-4,999	0.77	0.72	0.69	0.67	0.66	0.65	0.64	0.64
5,000-14,999	0.72	0.68	0.66	0.65	0.64	0.64	0.63	0.63
15,000+	0.71	0.67	0.66	0.64	0.64	0.63	0.63	0.62

BACK DOOR INTEGRATION WITH SICK LEAVE:

For plans allowing payment of sick leave in addition to STD benefits, rates are increased 1% for each 1% the total benefit exceeds 70% of payroll for the period during which the extra payments are being made. For preferred professional groups, this charge may be waived. For groups for which sick leave amounts are not known, refer to Group Actuarial.

EXAMPLE: The group requests a 70%, 1-8-26 plan with 100% back door sick leave integration. Average sick leave is 5 weeks.

The starting rate for a 1-8-26 plan is .070. The starting rate for a 1-8-4 plan is .032

$$.032/.070 = .46$$

$$.46 \times .30 = .14$$

The load for this group would be 14%.

DAILY HOSPITAL BENEFIT:

For plans providing payment during the benefit waiting period while hospital confined, add the following factors for each \$1 of benefit:

<u>PLAN</u>	<u>RATE</u>	<u>PLAN</u>	<u>RATE</u>
1 - 4	\$.003	8 - 8	\$.006
1 - 8	.005	15 - 15	.009
1 - 15	.007	30 - 30	.011
1 - 31	.009	60 - 60	.014
4 - 4	.003	90 - 90	.017

FIRST DAY HOSPITAL:

For plans providing payments commencing the first day the insured is hospitalized and continuing through the benefit waiting period (as long as the disability continues) whether hospitalization continues or not, add the following factors for each \$1 of benefit:

<u>PLAN</u>	<u>RATE</u>	<u>PLAN</u>	<u>RATE</u>
1 - 4	\$.004	8 - 8	\$.008
1 - 8	.007	8 - 15	.013
1 - 15	.012	15 - 15	.014
4 - 4	.004		

INTEGRATED BENEFITS:

Refer to the Home Office.

LIST BILLING:

<u>LIVES</u>	<u>FACTOR</u>
< 100 Lives	No Load
100+ Lives with EBA	No Load
100+ Lives without EBA	1.02*

*There is no Load to STD when written with Life or LTD

PORTABILITY OF INSURANCE:

<u>FACTOR</u>
1.025

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Supporting Document Schedules

Satisfied - Item:	Cover Letter All Filings
Comments:	
Attachment(s):	DC cover letter 20140311085750020.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Certificate of Authority to File
Bypass Reason:	We are not using a third party filer
Attachment(s):	
Item Status:	
Status Date:	

Satisfied - Item:	Actuarial Memorandum
Comments:	
Attachment(s):	DC memorandum 03-2014.pdf
Item Status:	
Status Date:	

Bypassed - Item:	Actuarial Justification
Bypass Reason:	Please see Actuarial Memorandum for certification.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
Bypass Reason:	This is not a P&C filing.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
Bypass Reason:	This is not a P & C filing.
Attachment(s):	
Item Status:	
Status Date:	

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Bypassed - Item:	Actuarial Memorandum and Certifications
Bypass Reason:	This does not apply to this filing.
Attachment(s):	
Item Status:	
Status Date:	

Bypassed - Item:	Unified Rate Review Template
Bypass Reason:	Unified Rate Review is not applicable to this filing.
Attachment(s):	
Item Status:	
Status Date:	



Standard Insurance Company

District of Columbia

Company Filing # GP399-STD/A1213-DC

Our proposed effective date is: On Approval

The purpose of filing is in support of new language for a Pre-Existing Condition Exclusion and Portability of Insurance.

This is not our initial filing; this is a product amendment.

We currently have DC Policyholders.

This amendment has no premium impact on DC Policyholders.

Sr. Actuarial Analyst

03/11/2014

Standard Insurance Company
ACTUARIAL MEMORANDUM
Short Term Disability

District of Columbia

Re: GP399-STD/A1213

Scope and Purpose of Filing

Standard Insurance Company is filing new rating factors for our Group Short Term Disability product to support proposed new language for a Pre-Existing Condition Exclusion and Portability of Insurance. There is no change to existing factors or to any inforce customer.

Description of Benefits

This policy provides income replacement to individuals who are unable to work during a period of disability. Benefits generally include an initial waiting period, a benefit as a percentage of salary, and a maximum benefit period.

Renewability

The above reference form is renewable on a conditionally renewable basis.

Applicability

This form has both new issues and renewals.

Marketing Method

This product is marketed through independent brokers and agents.

Underwriting Method

Underwriting is conducted at the group level and all eligible members of the group are provided coverage. In instances where members have choice in whether to enroll, medical underwriting may be applicable for late enrollees or if the member chooses to increase their level of benefits.

Issue Age Range

This product is available to all qualified members of a group regardless of age.

Premium Basis

This product is issued to groups. Rates will normally be determined on a monthly basis with a small number on a 13thly, quarterly or annual basis.

Proposed Rate Changes

There are no proposed changes to existing rates or the rating structure in this filing. As a result, there is no impact on existing District of Columbia policyholders. Rating factors were added to support proposed new language for a Pre-Existing Condition Exclusion and Portability of Insurance.

Anticipated Loss Ratio

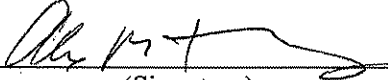
The anticipated loss ratio is 62% for groups with less than 100 lives and 72% otherwise.

Assumptions

Interest rate, trend and persistency assumptions are non-applicable to this product as the liabilities are short term in nature and premiums automatically reflect benefit amounts making it unnecessary to apply a trend adjustment.

Actuarial Certification

I certify that I am a member of the American Academy of Actuaries, that I meet the qualification for issuing the actuarial opinion on behalf of Standard Insurance Company. To the best of my knowledge and judgment the entire rate filing is in compliance with the applicable laws of the District of Columbia and with the rules of the Office, complies with all applicable Actuarial Standards of Practice, and the benefits provided are reasonable in relation to the proposed premiums. The premium schedule is not excessive, inadequate, nor unfairly discriminatory.



(Signature)

Alex Terry, FSA, MAAA

(Name)

2nd Vice President and Associate Actuary

(Title)

3-10-14

(Date)